

SECRET
(When Filled In)

| | | | |
|---|--|---|--|
| REQUEST FOR APPROVAL OR INVESTIGATIVE ACTION | | DATE 14 August 1959 | |
| <small>Submit (hand carry) 1 copy of this form to CI/OA</small> | | | |
| TO: CI/Operational Approval and Support Division | | FROM: CASONE | |
| SUBJECT: (True name) Josef FLACHMANN | | PROJECT EE/O | |
| CRYPTONYM, PSEUDONYM, AKA OR ALIASES | | CI/OA FILE NO. C-79172 | |
| | | RI FILE NO. C J | |
| | | SO FILE NO. | |
| TYPE ACTION REQUESTED | | | |
| <input checked="" type="checkbox"/> PROVISIONAL OPERATIONAL APPROVAL | | PROVISIONAL PROPRIETARY APPROVAL | |
| <input type="checkbox"/> OPERATIONAL APPROVAL | | PROPRIETARY APPROVAL | |
| <input type="checkbox"/> PROVISIONAL COVERT SECURITY APPROVAL | | COVERT NAME CHECK | |
| <input type="checkbox"/> COVERT SECURITY APPROVAL | | SPECIAL INQUIRY (SO field investigation) | |
| COVERT USE OF INDIVIDUAL OR ACTION REQUESTED | | | |
| IF REQUEST FOR POA AND IMMEDIATE OPERATIONAL USE, PLEASE COMPLY WITH SECTION 6A. FR 10-215. | | | |
| SPECIFIC AREA OF USE | | | |
| FULL DETAILS OF USE Will be used as an unwitting reporting source for CASONE-1 at the University of Munich, Germany | | | |
| INVESTIGATIVE COVER | | | |
| IS OR WILL SUBJECT BE AWARE OF U.S. GOVERNMENT INTEREST IN HIM? | | YES | <input checked="" type="checkbox"/> NO |
| IS OR WILL SUBJECT BE AWARE OF CIA INTEREST IN HIM? | | YES | <input checked="" type="checkbox"/> NO |
| INDICATE SPECIAL LIMITATIONS OR COVERAGE DESIRED IN THE SECURITY OFFICE INVESTIGATION | | | |
| IF NO INVESTIGATION OUTSIDE CIA, EXPLAIN FULLY | | | |
| PRO AND GREEN LIST STATUS | | | |
| <input checked="" type="checkbox"/> PRO I. OR EQUIVALENT. IN (2) COPIES ATTACHED | | PRO II WILL BE FORWARDED | |
| <input type="checkbox"/> PRO II. OR EQUIVALENT. IN (1) COPY ATTACHED | | <input checked="" type="checkbox"/> GREEN LIST ATTACHED. NO: 79774 | |
| FIELD TRACES | | | |
| <input type="checkbox"/> NO RECORD | | <input type="checkbox"/> NO INFORMATION OF VALUE | |
| <input checked="" type="checkbox"/> DEROGATORY INFORMATION ATTACHED, WITH EVALUATION | | <input type="checkbox"/> WILL BE FORWARDED | |
| RI TRACES (Derogatory Information and Evaluation Attached) | | | |
| <input checked="" type="checkbox"/> NO RECORD | | <input type="checkbox"/> NON-DEROGATORY | |
| <input type="checkbox"/> RECORD | | <input type="checkbox"/> DEROGATORY | |
| DIVISION TRACES (Derogatory Information and Evaluation Attached) | | | |
| <input checked="" type="checkbox"/> NO RECORD | | <input type="checkbox"/> NON-DEROGATORY | |
| <input type="checkbox"/> RECORD | | <input type="checkbox"/> DEROGATORY | |
| SIGNATURE OF CASE OFFICER C J | | EXTENSION 3915 | SIGNATURE OF BRANCH CHIEF C J |

FORM 772 USE PREVIOUS EDITIONS.
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SECRET

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SOURCES METHOD EXEMPTION 3B2B
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006